

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	10-24-00
FORMALITY REVIEW	A-M	TC-537	11-24-00
RESPONSE FORMALITY REVIEW	Am	637	11/24/01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
+	(Through numeral) Canceled	A	Appeal
	Restricted	O	Objected

Claim	Date
Original	3/1/00
Final	3/1/00
1	3/1/00
2	3/1/00
3	3/1/00
4	3/1/00
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50	3/1/00

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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